PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

CLAIMS AS FILED - PART I (Column 1) (Column 2)							_	SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY		
TOTAL CLAIMS			410				Γ	RATE	FEE	[RATE	FEE	
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			Cio minus 20=		* 20×			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			✓ minus 3 =		*	1%.	ſ	X42=		OR	X84=		
MULTIPLE DEPENDENT CLAIM PRESENT							Ī	+140=		OR	+280=		
* If	the difference	less than ze	ro, ente	r "0" in c	column 2	L	TOTAL		OR	TOTAL			
CLAIMS AS AMENDED - PAR					TII				-	0.5	OTHER		
_		(Column 1) CLAIMS	Ţ	(Colu	mn 2) HEST	(Column 3)		SMALL		OR I	SMALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X42=		OR	X84=		
	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	T CLAIM		I	+140=		OR	+280=		
							L	TOTAL			TOTAL		
										OR	ADDIT. FEE		
		(Column 1) CLAIMS			mn 2) HEST	(Column 3)							
AMENDMENT B		REMAINING AFTER AMENDMENT		NUN PREV	MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X42=		OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							1140-		1	+280=		
	·							+140=		OR	TOTAL		
			1	ADDIT. FEE		OR	ADDIT. FEE						
		(Column 1)			mn 2)	(Column 3)							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Į Į	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***		=		X42=		OR	X84=		
الـُ	FIRST PRESE	PENDEN	IT CLAIM	1	1 }	+140=		1		1			
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								,	OR	+280=		
**	** If the entry in column 1 is less than the entry in column 2, write 0 in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Nur	nber Previously Pa	aid For" (Total o	r Indepen	dent) is th	e highest numbe	er fou	ind in the ap	propriate bo	x in co	lumn 1.		